

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | m G | | 1/21/00 |
| O.I.P.E. CLASSIFIER | | 21 | 2/8/00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | DM | 72222 | 2-15-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
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| Claim | Date |
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| Claim | Date |
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Best Available Copy